

**SUMMARY OF
HITECH PROVISIONS OF THE AMERICAN RECOVERY AND REINVESTMENT ACT OF 2009**

Pg (pdf)	Sec	Title	\$\$	Fund Type (Grant, etc)	Description	Purpose of Funds	What	Who	Timing
163		Office of Secretary, ONCHIT			Provides an additional amount for ONC of \$2,000,000,000 \$300,000,000 of amount to support regional and sub-national HIE efforts \$20,000,000 of amount to be transferred to NIST	To carry out HITECH 0.25 percent of funds provided may be used for administration of such funds			2009 Operating Plan no later than 90 days after enactment.
292	3001	Subtitle A: Promotion of HIT: Office of the National Coordinator for HIT (ONC)		n/a	Establishes the Office of the National Coordinator to ensure the security and protection of patient's health information while improving the quality of care and reducing health care costs.				
403				n/a	ONC duties: establish standards, establish HIT Policy and Standards committees, strategic plan, website, voluntary certification program recognition, reports & publications, assess impact on communities, estimate funding required for federal, regional, governance for HIE network				
303				n/a	Chief Privacy Officer of ONC- advises ONC on privacy, security. & data stewardship of HIE and coordination with other Federal, State & regional efforts, & with foreign countries.				
304	3002	ONC: HIT Policy Committee		n/a	Make policy recommendations to ONC re: implementation of NHIN technology infrastructure	Required areas for consideration, technology for: <ul style="list-style-type: none"> • Data segmentation • Limited data sets • Accuracy of data • Accounting of Disclosures • Quality of care • De-Identification of data • Demographic Data • Needs of children 	Other areas for consideration: <ul style="list-style-type: none"> • Use of national NHIN for • Public reporting • Biosurveillance & public health • Research • Drug Safety • Telemedicine technologies • Home health care • Etc. 	(c)Members: 1 apptd. by Sectary 1 rep of DHHS 1 public health official 2 apptd. by Senate 2 apptd. by House 13 by comptroller General of US <ul style="list-style-type: none"> • 3 advocates for patients or consumers • 2 providers • 1 labor • 1 privacy/security expert • 1 researcher • 1 payer • 1 vendor • 1 purchaser/employer • 1 quality measurement 	45 days from enactment to appoint members or Secretary of DHHS does appointments Rules by 12-31- 09.

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315	3003	ONC: HIT Standards Committee		n/a	Make recommendations to ONC re: standards, implementation specifications & certification criteria for HIE	Harmonize HIT standards Pilot test standards and imp. spec. Consistency with SSA 1173		Members: at least reflect: providers, ancillary h/c workers, consumers, purchasers, plans, tech. vendors, researchers, Relevant Fed. Agencies individuals w/ tech. expertise on: • h/c quality, • privacy & security, and • electronic exchange and use of health information	No later than 90 days from title enactment, Committee develop schedule for assessment of policy recommendations
324		Application to Federal Agencies			Coordination of HIT for federal agencies				
333	13201	Research & Development Programs: Healthcare Information Enterprise Integration Research Centers		n/a	NIST Director establishes assistance program to institutions of higher education to establishment Multidisciplinary Centers for the Health Care Information Enterprise Integration	General innovative approaches to h/c information enterprise integration by conduction multidisciplinary research on systems challenges to h/c delivery, Develop & use of HIT and other complementary fields including HIT security and integrity	Applications to NIST	Higher Education Institutions	
337	13301	Subtitles C Grants and Loans - B: Incentives for the Use of HIT. the HIT Infrastructure							
337	3011	Immediate Funding for HIT	Funds from § 1038	Investment in HIT	Invest in the infrastructure necessary to allow for and promote the electronic exchange and use of health information for each individual in US using amounts appropriated under § 3018	<ul style="list-style-type: none"> HIT architecture that supports nationwide HIE, connecting health exchanges, may include updating & implementing infrastructure w/in different HHS agencies Develop & adopt certified EHRs for providers not eligible under Title XVIII or XIX of SS Act for adoption of such records Training on and dissemination of info on best practices to integrate HIT Infrastructure & tools for promotion of telemedicine Promotion of interoperable clinical data repositories/registries 		Invest funds through ONC, HRSA, AHRQ,CMMS, CDC, Indian Health Svc (IHS) to support the following (1)-(8)	
340	3012	HIT Implementation Assistance	Unknown Unknown Awards	Direct funding from DHHS	HIT Extension Program HIT Research Center HIT Regional Centers	HIT extension program to assist providers to implement and use EHR technology Creation of HIT Research Center to provide technical assistance and best practices for HIT use Provide assistance for creation & support of Regional Centers		Health Care Providers DHHS US based nonprofit organizations	90 days from enactment – draft program description for applicants

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			for 4 years 50% fed funds						
348	3013	State Grants to Promote HIT		Grant-MOE: 2010 – Up to DHHS Secty. 2011 - Y1= \$1:\$10; 2012 Y2= \$1:\$7; 2013 Y3= \$1:\$3	Planning Grants - Implementation Grants	Facilitate & expand electronic movement and use of health information among organizations	Planning Grants Implementation Grants	State or State Designees & consult with: healthcare providers, plans, patients or consumer orgs, HIT vendors, purchasers and employers; public health agencies, health professions schools, universities & colleges, clinical researchers, HIT users	DHHS has 90 days from signing to operationalize -Unknown application period Unknown evaluation period -Unknown funding date
355	3014	Competitive Grants to States & Tribes for Development of Loan Programs to Facilitate Adoption of EHRs		Grants for Competitive Loan Program- can use 4% annually for administration MOE \$1 to \$5 federal	Establish programs for loans to healthcare providers	Establish EHR technology loan fund	Facilitate use of EHR technology, train personnel and improve eHIE State must submit strategic plan based on ONC guidelines	States or Indian Tribe Loans to health care providers not exceeding market interest rates for no more than 10 years	No awards under this program prior to 1-1-2010
363	3015	Demonstration Program - Integrate IT into Clinical Education		Grant-Competitive; peer review 50% federal funding limit	Secretary may award grants to carryout demonstration project to develop academic curricula integrating certified EHR tech in clinical education of health professionals. <i>Limitation:</i> cannot purchase hardware, software, or services	Collaborate with 2 or more disciplines Integrate certified EHR technology into community-based clinical education	Submit application & strategic plan for integrating certified EHR technology in the clinical education of health professional to reduce medical errors and enhance healthcare quality	School of medicine, osteopathic medicine, dentistry, or pharmacy, a graduate program in behavioral or mental health, or any other gradual health professions school; A graduate school of nursing or physician assistant studies An institution with a graduate medical education program in medicine, osteopathic medicine, dentistry, pharmacy, nursing, or physician assistance studies	
367	3016	Information Technology Professionals on Health Care		Assistance	Financial Support: Secretary may not provide more than 50% of costs of any activity	Assistance to establish or expand medical informatics education programs, including certification, undergraduate, and masters degree programs, for both healthcare & IT students to ensure rapid and effective use and development of HIT	Develop & revise curricula in med health informatics & related disciplines Recruiting & retaining students to the program Acquire equipment necessary for student instruction in these programs, including installation of test bed Establish or enhance bridge programs in health informatics fields between community colleges & universities' networks	Institutes of higher education or consortia thereof	

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471	3018	Authorization for Appropriations			To carry out this subtitle, funds are authorized to be appropriated as may be necessary				For each fiscal years from 2009-2013 (until expended).

PRIVACY AND SECURITY PROVISIONS
(No immediate implementation decisions required)

Pg (pdf)	Sec	Title	Description	Funds	What	Who	Timing
369	13400	Privacy	Extends HIPAA privacy and security protections to HIT entities	N/A	HIPAA Privacy and Security Provisions	Business Associates	Unless otherwise indicated – 12 months after enactment
373	13401	Security and Penalty Provisions	Apply to Business Associates				
375	13402	Breach Notifications	Requires notification of breaches to DHHS	Breaches if over 500 affected individuals report to media			
383	13403	Education on Health Information Privacy	Creates Regional Office Privacy Advisors	Guidance and Education to covered entities, business associates and individuals on rights and responsibilities related to federal privacy and security requirements for protected health information OCR establish national education initiative		DHHS OCR	Appoint Advisors no later than 6 months after enactment. 12 months/ enactment
384	13404	Privacy Provisions to Business Associates	Application of privacy provisions to BA’s and civil and criminal penalties to business associates that violate privacy provisions.				
385	13405	Restrictions of Disclosures	Covered entities must comply with individual requests for restrictions of disclosure of information when individual has paid out of pocket in full for services. Covered entities shall limit access, uses or disclosures to limited data sets to extent practicable Individuals have right to an accounting of disclosures				
396	13405	Conditions on Certain Contacts	Covered entity or BA shall not receive remuneration in exchange for information unless valid authorization or: <ul style="list-style-type: none"> Public health activity Research Treatment Health care operations BA activities Individual access 				For CEs with EHRs – 1-1-2014 Others 1-1-2011 or acquisition of EHRs Sale of Data – DHHS regulations 18 months after enactment

Pg (pdf)	Sec	Title	Description	Funds	What	Who	Timing
	13405	Electronic Health information	Individuals have access to electronic protected health information				6 months after enactment of implementing regulations
396	13406	Health Care Operations Marketing	Not health care operations: <ul style="list-style-type: none"> • Communication to individual encouraging purchase of product or service • Communication with BA that is marketing 				12 months after enactment
398		Health Care Operations – Opt Out of Fundraising	Provide opportunity for individual to opt out of use of information for fundraising				12 months after enactment
399	13407	Temp. Breach Notification	Requires breach notification for PHR entities			Vendors of PHRs and other non-HIPAA covered entities: Third-party service providers	180 days after enactment
403	13408	BA Contracts	Requires BA agreements with HIE entities			Covered entities with entity who provides data transmission, such as RHIO, HIE Organization, e-prescribing gateway.	Date of enactment
404	13409	Criminal Penalties for Wrongful Disclosures	Included persons subject to criminal penalties				
405	13410	Improved Enforcement	Provides tiered increase in amount of civil penalties Allows for enforcement through State Attorneys General				Upon enactment
417	13421	Relationship to Other Laws	Carries over HIPAA State Preemption to new provisions HIPAA remains in effect to the extent consistent with new Privacy rules				
418	13424	Studies, Reports, Guidance	Requires DHHS Secretary to report on Privacy and Security Requirements to Non-HIPAA covered entities.				1 year after enactment
		De-Identification of Health Information	Secretary of DHHS shall issue guidance on how best to implement de-identification of health information requirements				12 months after enactment
		Treatment	GAO report best practices related to use of protected health information by providers for treatment				1 year after enactment
		Psychotherapy Notes	Secretary of DHHS shall study impact of psychotherapy notes and HIE				

MEDICAID INCENTIVES FOR HEALTH INFORMATION TECHNOLOGY

Pg (pdf)	Sec	Title	Description	Funds	What	Who	Timing
	4101	Incentives for Eligible Professionals	<p>Provides incentive payments to eligible professionals. Encourage the adoption and use of certified EHR technology</p> <p>Not in excess of 85 percent of net average allowable costs for eligible professionals for certified EHR technology</p> <p>In no case shall the payments described in paragraph with respect to a Medicaid provider described in paragraph exceed</p> <ul style="list-style-type: none">in the aggregate the product of:<ul style="list-style-type: none">-the overall hospital EHR amount for the provider and-the Medicaid share for such provider;in any year 50 percent of the product described in clause (i); and <p>in any 2-year period 90 percent of such product.</p>	<p>\$40,000,000 for each fiscal years 2009-2015</p> <p>\$20,000,000 for fiscal year 2016</p>	<p>The net average allowable costs for the first year of payment (which may not be later than 2016), exceed \$25,000 (or such lesser amount as the Secretary determines based on studies conducted;</p> <p>The net average allowable costs under this subsection for a subsequent year of payment, which is intended to cover costs, exceed \$10,000; and payments are made for costs after 2021 or over a period of longer than 5 years.</p>	<p>Payments made by the State to Medicaid providers:</p> <ul style="list-style-type: none">physician;dentist;certified nurse mid-wife;nurse practitioner; andphysician assistant insofar as the assistant is practicing in a rural health clinic that is led by a physician assistant or is practicing in a Federally qualified health center that is so led	

BROADBAND

Pg (pdf)	Sec	Title	Description	Funds	What	Who	Timing
		Broadband Technology Opportunities Program	Establish a national broadband service program	<p>\$4,700,000,000</p> <p>\$4,350,000,000 for national broadband service program</p> <p>\$200,000,000 for competitive grants expand public computer center capacity</p> <p>\$250,000,000 for grants sustainable adoption of broadband services</p> <p>\$10,000,000 for audit and oversight</p> <p>\$350,000,000 develop and maintain broadband inventory map</p> <p>No greater than 80% federal share</p>	Not less than 1 grant in each state	<p>Asst. Secretary of Commerce for Communications and Information</p> <p>Grantee –</p> <ul style="list-style-type: none">state or political subdivisionA nonprofit foundation, corporation, institution or association, orAny other entity approved by Asst. Secretary	Grants before end of 2010